DOCUMENT RESUME

ED 189 462 CE 026 181

TITLE Nursing Faculty Develcpment. Final Report.
INSTITUTION Southern Regional Education Board, Atlanta, Ga.
SPONS AGENCY Public Health Service (DHEW), Arlington, Va. Div. of Nursing.
REPORT NO PHS-D10NU02029
PUB DATE 80
NOTE 59p.

EDRS PRICE MF01/PC03 Plus Postage.
DESCRIPTORS Cultural Awareness; Cultural Background; *Cultural Differences; Cultural Influences; *Faculty Development; Instructional Improvement; Learning; Learning Problems; *Nursing Education; Postsecondary Education; Program Effectiveness; School Holding Power; Student Attrition; *Teacher Attitudes; *Teacher Improvement; Teaching Methods; *Teaching Skills; Teaching Styles

ABSTRACT

The Southern Regional Education Board administered a three-year Faculty Development in Nursing Education Project. Its three objectives were (1) to provide opportunities for faculty to improve their abilities to identify learning problems; study alternative learning strategies; present instruction appropriate to the learning types of students; and recognize, respect, and adapt to cultural differences; (2) to disseminate information about effective strategies; and (3) to assess the efficiency and effectiveness of the various activities initiated. Activities implemented at twenty sites (college-sponsored programs) reflected three major emphases--learner, teacher, and instructional process. Specific focuses included learning and teaching styles of learners and teachers and how these styles could be used to promote improved teaching and learning experiences, identification of learning obstacles and use of appropriate measures to overcome them, impact of cultural variations on teaching and learning, and increase of teacher awareness of cultural values and decrease of misconceptions and stereotypical expectations. (Examples of activities at various sites are cited as appropriate to the discussions.) Nurse faculty and task force leaders completed evaluation forms as project evaluation. Results attested to project effectiveness as a model for directing attention to attitudinal and procedural barriers that inhibit the educational experiences of students from diverse cultural and educational backgrounds. (YLB)

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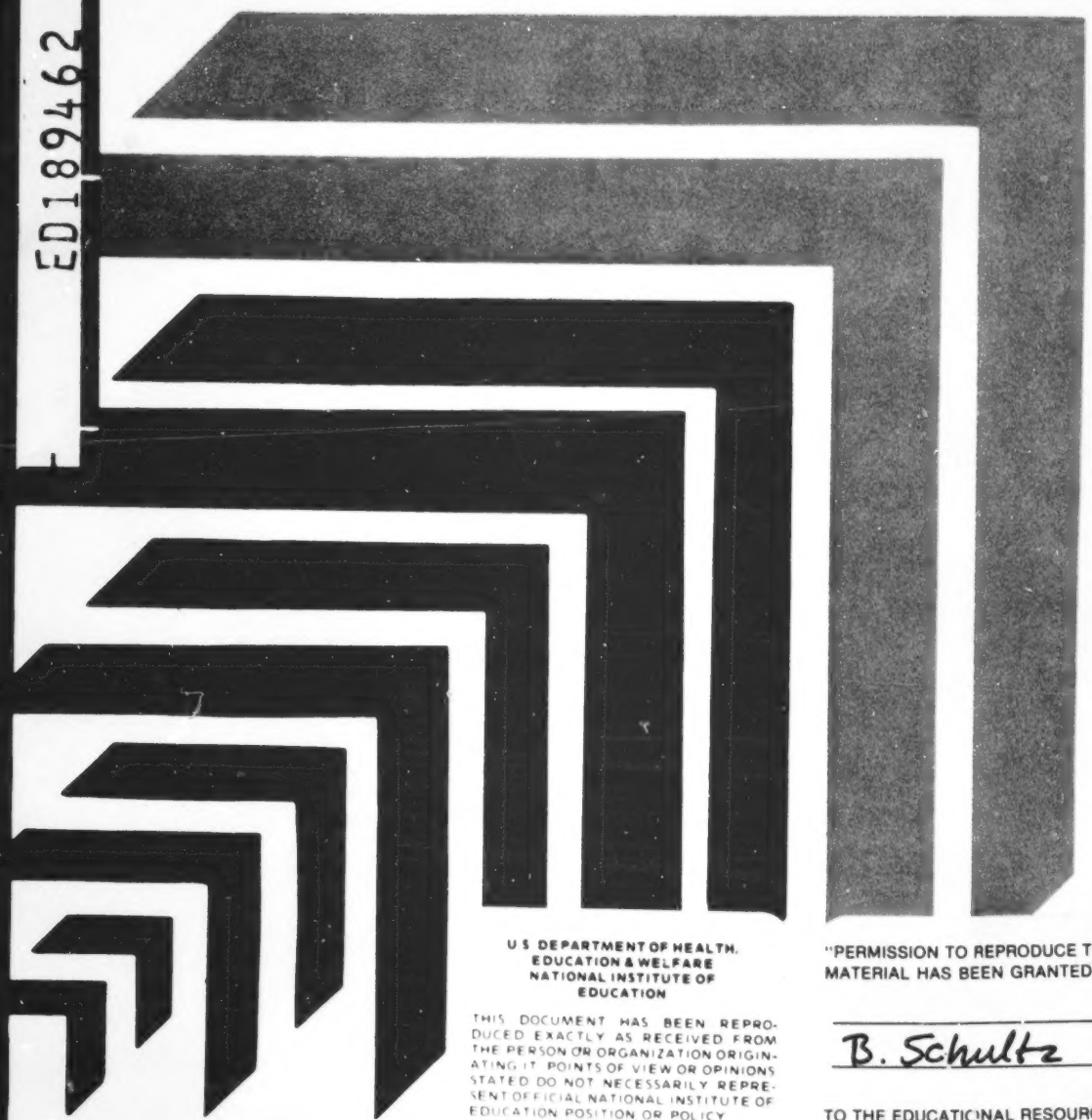

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Final Report
Nursing Faculty Development

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1980

SEP 2 1980

A publication of the Faculty Development in Nursing Education Project (PHS D10NU02029), U. S. Department of Health, Education, and Welfare, Health Resources Administration, Division of Nursing.

Foreword

This publication summarizes the activities and accomplishments of the Faculty Development in Nursing Education Project, a three-year grant funded by the Division of Nursing, U. S. Department of Health, Education, and Welfare, and administered by the Southern Regional Education Board. It presents a frame of reference for initiating and continuing activities to effect improved learning experiences for students of diverse cultural and educational backgrounds.

The project staff, advisory committee, and evaluation team recognize the opportunities for nurse educators to enhance their teaching skills that were made possible by this grant. It is anticipated that the long-range effects of these opportunities will become evident in improved health delivery services in the South.

The staff acknowledges the support and cooperation of nurse administrative heads, task force leaders and members, and the nurse faculty at the 20 institutions selected to participate in this endeavor.

Audrey F. Spector
Nursing Programs Director

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Background Information

The first section of the publication presents background information regarding the need for the project, general assumptions and goals pertinent to the proposed endeavor, and the scope of work. The remainder of the publication addresses some of the issues and achievements during the project period. The three major emphases of the project, i.e., the learner, the teacher, and the instructional process, determine the parameters of the discussion. Examples of activities at the various project sites are cited as appropriate to the discussions.

Need

In 1972, the Division of Nursing, U.S. Department of Health, Education, and Welfare awarded the Southern Regional Education Board (SREB) a three-year contract to increase "opportunities for persons from disadvantaged environments in college-based programs." During this demonstration project, conducted at three institutions in the South, it became evident that *recruitment* of persons from disadvantaged backgrounds or who were underrepresented in the nursing profession was not the major obstacle in access to the profession. Rather, *retention* was the significant factor.

The three-year contract, commonly referred to as Project IODINE (acronym for Increasing Opportunities for the Disadvantaged in Nursing Education), demonstrated that:

(1) Recruitment and retention of persons previously viewed as unqualified was possible in college-sponsored nursing programs.

(2) Providing support services, e.g., counseling, tutorials, study assistance, and financial assistance, enabled high risk students to complete the curricular requirements.

(3) Firm support and commitment on the part of faculty and the administrative staff were essential to success.

(4) Additional time and effort on the part of faculty was needed to help students "catch up" and "keep up."

(5) The targeted student populations, i.e., those who are either underrepresented in nursing or presented academic deficiencies, did not create problems.

(6) Barriers resulting from racial prejudice and discriminatory practices could not be ignored.

(7) Making curricular plans more flexible did not lower standards or dilute content.

(8) Instructional strategies could be modified to accommodate the needs of students.[1]

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[1]Southern Regional Education Board, *Developing Potential Manpower in Nursing: Final Report* (Atlanta: Southern Regional Education Board, 1975), p. 34-35.

One of the recommendations evolving from the three-year contract was that "opportunities be provided at the regional level for faculty in college-sponsored nursing programs to improve their capability to diagnose learning problems, prescribe various learning options, and to adjust instructional strategies to the learning styles of students."[2]

This recommendation was a catalyst in the conceptualization of the faculty development proposal in 1975. Nurse educators in the South, especially at the three sites involved in Project IODINE, requested assistance in coping with some of the problems manifest in the various academic settings. These educators were concerned about the high attrition rates among students who were unable to meet curricular requirements. Students of diverse backgrounds brought values, language patterns, lifestyles, and beliefs that were different from those of the majority of students in the three academic settings. Many faculty experienced uneasiness because more students entering nursing programs were less prepared than in the past, or were less motivated to acquire the information offered. The most obvious problem encountered was the lack of basic skills in reading, writing, and mathematics; however, other problems were evident. For example, faculty had to cope with the problems of mature learners who brought skills and knowledge acquired in non-college settings and who often had responsibilities of caring for and supporting families. Educational goals differed among the student populations. Many of the students were seeking advancement in employment or were making career changes. Some students were place-bound and unable to become full-time enrollees. These students, by their diversity, created stresses in the academic settings that could not be ignored. Therefore, it was crucial that the nurse educators develop sensitivity to the particular needs of the student populations served and improve their ability to recognize and cope with the varied problems.

One of the keys to effecting improved learning experiences for all students is the faculty. The Southern Regional Education Board proposed to provide opportunities for nurse educators at 20 selected institutions to enhance their skills so that learning opportunities for students of diverse or disadvantaged backgrounds could be more effective. (The term *diverse* refers to cultural and educational differences; *disadvantaged* relates to those factors that impede acquisition of the necessary academic skills for advanced study.) The proposal was designed to assist nurse faculty to improve teaching capabilities in accordance with identified needs, values, and philosophy.

The following asumptions were inherent in the conceptual development of the proposal:

1) The admission of students of diverse or disadvantaged backgrounds demands that faculty address some of the issues and problems these students encounter in educational settings.

2) Faculty development activities can influence change in attitude, process, and structure.

3) Nurse educators, regardless of age, experience, or effectiveness, can improve teaching skills in many ways.

4) Nurse educators need assistance in identifying learning obstacles, selecting alternative teaching strategies, and utilizing support services to provide more effective learning experiences for students of diverse or disadvantaged backgrounds.

The proposal addressed the essential components of an effective faculty development program, e.g., attitude, process, and structure.[3] It was not designed as a remedial program for

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[2]Ibid., p. 36.

[3]William H. Berquist and Steven R. Phillips, *A Handbook For Faculty Development* (Washington, D.C.: Council for the Advancement of Small Colleges, 1975), p. 5-6.

poor teachers or underachievers. Instead, it was planned to assist the nurse faculty, regardless of experience or academic preparation, to cope more effectively with the needs of students who differed from the typical student admitted to the nursing program. Basically, the project would help the faculty develop more positive attitudes toward the need for changes and gain new skills and abilities needed in the changed circumstances.

Scope of Work

In March 1977, the Division of Nursing, U.S. Department of Health, Education, and Welfare awarded the Southern Regional Education Board a grant to conduct a three-year Faculty Development in Nursing Education Project.

Objectives

The objectives for the regional activity were:

1. To provide opportunities for faculty, particularly in nursing, to improve their abilities to a) identify learning problems; b) study alternative learning strategies; c) present instruction appropriate to the learning styles of students; and d) recognize, respect, and adapt to cultural differences.
2. To disseminate information about effective strategies.
3. To assess the efficiency and effectiveness of the varied activities initiated.

Sites

Twenty college-sponsored programs were selected by a five-member advisory committee[4] and project staff. In selecting the 20 programs, consideration was given to: geographical representatives, i.e., location of the nursing program within the SREB states; type program; location of program, i.e., rural or urban setting; diversity of the faculty and student populations; availability of various support services; and stated reasons for wanting to participate. Collectively, the programs selected to participate represented 12 associate degree, two baccalaureate and higher degree, and six baccalaureate degree programs in three private and 17 public institutions. Figure 1 depicts the location of the selected sites. Four of these sites are located in traditionally black institutions.

The nurse administrative head at each site appointed task forces to coordinate and implement project plans and activities. Task force appointees represented those faculty who were committed to the project's purposes and goals and who could interact positively with other colleagues and students in the university or college setting. A nurse educator served as the

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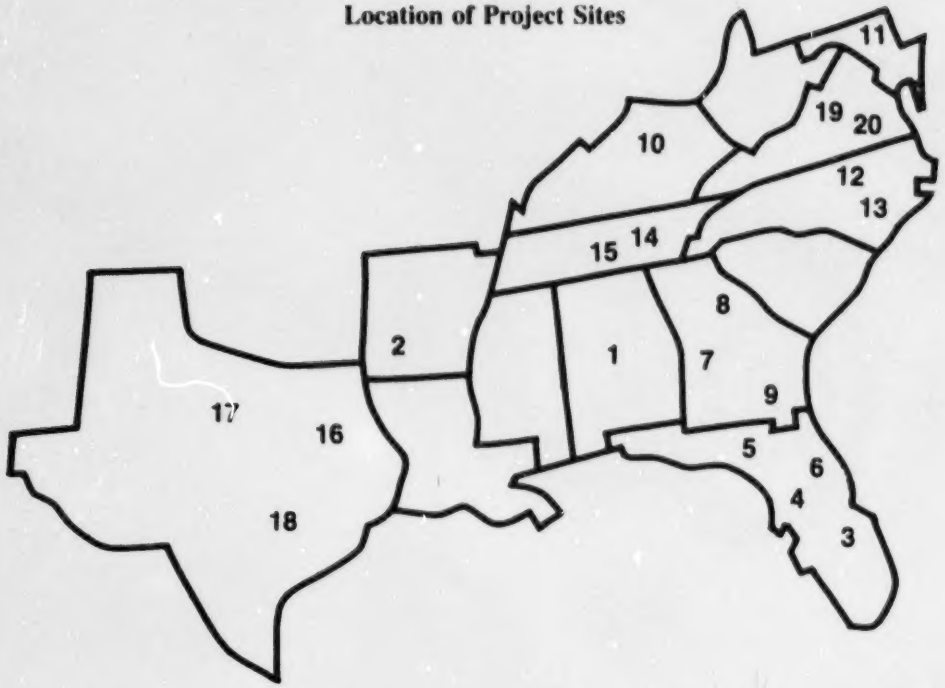
[4]Members were: Shirley Dooling, Dean of Nursing (University of St. Thomas); Willie T. Ellis, Vice President of Academic Affairs (North Carolina A&T State University); Sylvia Hart, Dean of Nursing (University of Tennessee at Knoxville); James O. Hammons, Professor of Education (University of Arkansas at Fayetteville); Shirley Lee, Nursing Program Head (Tidewater Community College).

FIGURE 1

Location of Project Sites



Alabama
- (1) University of Alabama in Birmingham

Arkansas
- (2) Southern Arkansas University in Magnolia

Florida
- (3) Daytona Beach Community College in Daytona Beach
- (4) Polk Community College in Winter Haven
- (5) Santa Fe Community College in Gainesville
- (6) Valencia Community College in Orlando

Georgia
- (7) Albany State College in Albany
- (8) Georgia College in Milledgeville
- (9) Valdosta State College in Valdosta

Kentucky
- (10) Kentucky State University in Frankfort

Maryland
- (11) University of Maryland at Baltimore

North Carolina
- (12) North Carolina A&T State University in Greensboro
- (13) North Carolina Central University in Durham

Tennessee
- (14) Lincoln Memorial University in Harrogate
- (15) University of Tennessee at Nashville*

Texas
- (16) Texarkana College in Texarkana
- (17) Texas Christian University in Fort Worth
- (18) University of St. Thomas in Houston

Virginia
- (19) J. Sargeant Reynolds Community College in Richmond
- (20) Tidewater Community College in Portsmouth

*Now Tennessee State University.

task force leader; members included representatives from the nurse faculty and other related disciplines, e.g., education, counseling, natural sciences, social sciences, and varied in number from 5 to 15 persons. (A roster of the task force members is in Appendix A.)

Each project site specified the diverse groups of students in its own setting. This specification was not limited to academically disadvantaged or minority students, though ethnicity was a prime determinant at many sites. Other determinants included sex, age, class, values, customs, and academic entry skills. Some of the targeted student categories were: male students trying to break role patterns; rural students enrolled in an urban college or university, white students enrolled in a predominantly black university, or nonwhite students enrolled in a predominantly white institution; educationally or socioeconomically disadvantaged students; first generation college-goers; transfer-in students, i.e., from a junior college or another university setting; and students older than the traditional 18- to 24-year-old college student.

Formats of Implementation

Each project site developed specific objectives (see Appendix B) and conducted activities to accomplish the stated campus goals. These goals were congruent with those of the project. Therefore, the various activities that were planned and implemented differed in the extent to which they accomplished the specific objectives to be met. The formats used to provide the needed services to the faculty included: workshops, seminars, direct consultations, regional meetings, newsletters, and publications. The grant provided funds for workshops, consultations, and travel expenses for four representatives from each site to attend regional meetings. In addition to workshops funded by the grant, the nurse educators participated in institutional workshops or training sessions and held additional meetings and consultations to augment the project activities.

Program Emphases

The varied activities implemented at the project sites reflected three major emphases: 1) the learner, 2) the teacher, and 3) the instructional process. Activities at 11 project sites focused specifically upon the learning and teaching styles of learners and teachers and how these styles could be used to promote improved teaching and learning experiences. Nurse educators at four sites concentrated on the identification of learning obstacles and the use of appropriate measures to overcome these problems. The impact of cultural variations on teaching and learning was addressed at all of the sites; however, faculty at five sites specifically aimed to increase their awareness of cultural values and to decrease misconceptions and stereotypical expectations.

The remainder of this publication addresses some of the issues and achievements during the project period. The three emphases mentioned earlier, i.e., the learner, the teacher, and the instructional process, determine the parameters of the discussion. Examples of activities at the various project sites are cited as appropriate to the discussions.

Project Emphases

The Learner

It is important that the student population to be served is clearly defined. Faculty perceptions and expectations of this population influence significantly the kinds of teaching and learning experiences provided. The subpopulations of students—learners over 25 years of age, male, minority, underprepared—present needs that cannot be ignored. The needs of the underprepared, i.e., basic skill deficits, are most obvious and are usually addressed first. However, the particular needs of students in other populations cannot be overlooked.

Basic Skill Deficits

The key to student success in nursing is early identification of skill deficits, preferably before the student is admitted to a program. In assessing prospective students the following questions merit attention:

Are applicants able to read well enough to understand the textbooks required for both nursing and non-nursing courses?

Will the applicants succeed in the lowest level writing course the college offers?

Do the applicants have the necessary skills to master the basic mathematics course?

Will the applicants be able to succeed in the beginning science courses?

Are the applicants aware of the time and learning effort required to succeed in the nursing program?

Are the applicants willing to make the investment needed for success?

The answers to these questions are important in deciding upon the admission of students to a nursing program.

In addition to assessing the prospective applicants, it is equally important that attention is directed to the nursing program and the academic setting in which the applicants will study.

Are human and physical resources to assist the learners available?

Are the support services adequate and effective?

If these resources are not available, extreme caution should be used in selecting applicants who may require assistance in overcoming academic handicaps. In fact, it may be better not to admit such persons into the program.

Moreover, if resources are available, and the faculty is committed, a variety of tests can be employed to pinpoint academic problems and to direct the students into appropriate skills courses in mathematics, reading, and writing. Maxwell[5] identifies some of the standardized tests in reading, writing, mathematics, and science that can help the faculty identify learning problems. However, when evaluating the results, it is important that faculty be aware of the standards specific to a particular setting that may vary from the national norms. In addition to the standardized tests, self-assessment instruments may be developed and used to assist students and faculty in determining how well prepared a student is to meet the demands of a particular course.

In diagnosing learning difficulties it is important to identify and differentiate those extrinsic and intrinsic factors that can cause problems. For example, changes in academic demands, unclear criteria for evaluation, or rigid rules and policies of the institution or department can cause skill deficits. Students have little control over these factors; yet, they must learn to cope with these extrinsic factors in order to succeed. On the other hand, certain intrinsic factors create problems and deter academic achievement—physical disabilities, weak learning skills, inadequate high school preparation, or emotional and attitudinal problems sometimes unrelated to the academic setting, e.g., full-time or part-time employment and family responsibilities.

Since academically weak students tend to avoid seeking assistance, the faculty alertness for clues indicating difficulties can minimize frustration and attrition. Occasionally the more obvious problems, i.e., lack of skills in reading, writing, and mathematics, are not noticed until course failure is imminent. Because it is difficult to provide the necessary help at this time, both faculty and students are often angry and frustrated.

Many of the skills that need improvement for students to be successful in a college-sponsored nursing program relate to reading and writing, as Sylvia Hart and Kathleen Conlon point out in a discussion of SEEK, the Queens College program to assist students experiencing reading and writing difficulties.

> Many of the black and Puerto Rican students enrolled in the Queens College SEEK program had read widely, but were unable to identify the basic thesis of a story or even a paragraph. Frequently students concentrated on small details and remained unsuccessful in identifying the substance of the author's idea. The necessity of taking notes during a lecture or from an article or book frustrated these students, as this skill is dependent upon the student's ability to distinguish the essential point from the supplementary detail.[6]

They note that many of the SEEK students experienced difficulty in writing.

> They tended to suggest a topic, but failed to develop it before introducing another idea. The resulting disorganization offered little basis for developing such technical skills as paragraphing. Lack of other technical skills in sentence construction, such as subject-verb agreement, and sentence fragments were also present but grammatical principles are easier to correct.[7]

Improving reading comprehension is emphasized by Hart and Conlon.

> For those students in health science fields, including nursing, the ability to read with comprehension is indispensable. In a study done at Hostas Community

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[5]Martha Maxwell, *Improving Student Learning Skills* (San Francisco: Jossey-Bass, Inc., Publishers, 1979), p. 41-42.

[6]Sylvia Hart and Kathleen Conlon, *Diversity: Cultural and Educational* (Atlanta: Southern Regional Education Board, 1977), p. 13.

[7]Ibid., p. 14.

College (CUNY), the difficulty level of current textbooks was analyzed and compared with the entry level of the open enrollment students, which was about the ninth grade level. It was found that the reading level of college textbooks averaged at the 14th grade although variations within and between chapters was as much as five grade levels (grades 11-16).[8]

An assessment of commonly used nursing textbooks provides comparable date. For example,

Textbook	Readability Grade Level
Pharmacology (Bergerson)	17
Psychiatric (Burgess)	17
Patient Care, 3rd (DuGas)	11
Diagnostic Procedures (French)	17
Fundamentals of Nursing, 5th (Fuerst)	16
Workbook: Medical Surgical (Kurtz)	13
Patient Care (Lewis)	11
Pediatrics (Marlow)	11
Fluid Balance (Matheney)	14
Scientific Foundation, 3rd (Normac)	17
Maternity (Reed)	13.5
Math/Nursing (Sackheim)	9
Medical Surgical (Shafer)	14
Patient Care, 4th (Smith)	15
Nutrition, 3rd (Williams)	14

Nurse faculty at the project sites interacted with faculty and staff in the support services to plan activities that would help students overcome learning handicaps. The examples that follow demonstrate some of the efforts to minimize learning problems. The faculty observed that early detection of academic deficiencies helped students accept and respond more readily to various types of assistance.

[8]Ibid., p. 16.

EXAMPLES

- The nurse faculty at *Tidewater Community College* collaborated with the developmental studies faculty to help students overcome problems related to deficiencies in basic skills. They identified the necessary skills level for success in the nursing program, e.g., reading level, basic mathematical skills, communication abilities. This knowledge was used to help students become better prepared before entering the program. The students were required to enroll in developmental English and reading courses. Advanced reading courses were offered to students completing the required developmental courses. These courses helped students gain fluency, acquire further vocabulary growth, and improve their study skills.

  After determining basic skill level of students, the faculty reviewed the instructional materials and provided options in required reading assignments. Each instructor of nursing at Tidewater Community College determined the readability level of required reading assignments. Two methods, the Cloze and Fry Readability, were employed. The Cloze method provided a quick check on suitability for texts in the classroom during the first week of class. It demonstrated whether the text was on the student's instructional or independent reading level. The provision of options helped students achieve the objectives specific to the course or assignment.

  The nurse faculty at Tidewater shared responsibility with the developmental studies staff for some of the self-help techniques for reading improvement. More specifically, the faculty: (1) clarified assignments; (2) provided information regarding the relevance of sections of the reading assignments; (3) served as resource persons; (4) directed attention to vocabulary; (5) helped students recognize context clues; (6) identified "stopper" words; (7) helped students recognize prefixes and suffixes; and (8) showed students how to use the SQ34R Study technique to maximize learning.

  The faculty attributed the decrease in attrition of new students at Tidewater Community College to the combination of counseling and developmental studies prior to admission as well as the continued reinforcements following admission to the nursing program.

- Nurse educators at *North Carolina A&T State University* enlisted the support of the reading specialist to provide courses directed specifically to difficult content areas. Students were encouraged to attend "reading in the physical sciences" sessions where content specific to required science courses was used to improve reading skills. Students were alerted to "stopper" words and introduced to the scientific vocabulary.

- At *Georgia College* the nurse faculty identified some of the problems in mathematics encountered by students admitted to the nursing program. The faculty worked with the mathematics department faculty to coordinate activities designed to meet the specific needs of students enrolled in nursing.

- Faculty at *Texarkana Community College* and *Daytona Beach Community College*, following consultation with John Roueche, directed more attention to the review of the academic capabilities of prospective applicants and the program requirements for success.

EXAMPLES

- *The University of Tennessee at Nashville* nurse faculty were more aware of learning problems some students in that setting present and of measures to minimize these problems after workshops conducted by Michael Pasternak (George Peabody College) and Marie Branch (former director of a minority recruitment project sponsored by the Western Interstate Commission on Higher Education).
- Faculty at *Georgia College*, *Daytona Beach Community College*, *Southern Arkansas University*, *Texarkana Community College*, and *Valencia Community College* held workshops to help them cope more effectively with stress factors. The consultants, e.g., John Stathas (DeKalb College), Kathye Blagg (University of Arkansas at Monticello), Joan M. Matthews (University of Texas at Austin), demonstrated techniques faculty could use in various settings to identify stress factors and decrease anxiety.

Motivation

A prevalent concern among nurse educators at many of the project sites relates to the apparent lack of motivation observed in the student populations. Some students appear unmotivated and do not apply themselves to the tasks required for goal achievement in nursing. Faculty asked: How can we motivate these students?

Awareness of the extrinsic and intrinsic determinants of motivation helps to allay some of the misconceptions about the concept. The extrinsic factors, e.g., grades, money, increased social praise, are frequently the dominant factors in students' efforts to achieve specific goals. In contrast, some students derive satisfaction from the task and the value associated with solving a problem. Students who enroll in nursing because of pressures from the family, a desire to improve economic gains and social opportunities, or poor counseling in high school or college, may not value or assume responsibility for learning as much as persons who assume a greater role in the decision to study nursing.

Some students, though highly motivated, lack the necessary skills, aptitude, and background for the study of nursing. Identifying such students and providing appropriate counseling can avert unnecessary frustration and failure. Allowing these students to enroll and to continue in a program that cannot meet their needs is unjust to the students and the faculty. However, some faculty experience difficulty in reaching decisions to counsel such students out of the program.

Students who appear unmotivated and those who are highly motivated but lack academic skills create stresses in the academic settings. The former, according to Roueche and Mink, lack self-directedness.

> Counselors, instructors, and school administrators are beginning to realize that apparent lack of "motivation" seen in many students is due to an attitude on the student's part that he is not in control of his life. Such an attitude leads to a despairing "Why try?" and presents the student as unmotivated. This apparent lack of effort to do well or try seems to be based on the student's feeling that other people or outside influences (school) control what happens to him, no matter how hard he tries to accomplish anything.[9]

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[9]John Roueche and Oscar Mink, *Improving Student Motivation* (Manchaca, Texas: Sterling Swift Publishing Company, 1976), p. 9.

Among the strategies faculty employed or considered to help students become more self-directed were:

Establishing situations where students control the outcomes.

Assisting the students to recognize their responsibility in the learning process.

Helping students identify the alternatives to the unsuccessful behaviors and the consequences of these behaviors.

Reinforcing statements indicative of responsibility on the part of the student.

Helping students identify appropriate reasons for succeeding in the course or program.

These strategies are based upon the concept of locus of control, a personality variable developed from Rotter's social learning theory.

Cognitive styles

Cognitive style refers to the stable, consistent, yet distinctive, preferential manner in which individuals approach learning, organizing and processing information, and problem-solving. Cognitive styles are concerned with the process rather than the content. It is how we perceive, think, solve problems, or interact with others. The stability of cognitive styles is demonstrated by the fact that one can predict with reasonable accuracy that a person's particular style will remain the same over a period of time. Paradoxically, styles are changeable; individuals can switch from one style to another. A style may be suited differently for varying circumstances. Therefore, no one style is better than another.

Since cognitive styles have implications for teaching strategies, the nurse faculty at several project sites participated in workshops and work sessions to increase their knowledge of the concept and to determine the dominant styles of students enrolled in the programs. During the project period some faculty were only able to begin exploration of the concept and those measures employed to identify particular styles. In a few instances the faculty proceeded to assess styles of the student body and to utilize the results in the instructional process.

Regardless of the approach used to determine the cognitive styles of students, the nurse faculty became more aware of the variations in cognitive styles in the student populations, and the implications of these styles for the instructional process.

EXAMPLES

- The faculty at the *University of Alabama in Birmingham* used the framework of cognitive style mapping, as developed by Nunney and Hill[10] at Oakland Community College. The assumptions underlying this concept are: (1) man is a social creature with a capacity for deriving meaning out of his environment and personal experience; (2) man uses symbols in his search for meaning; and (3) these symbols acquire meaning through man's cultural experience. The responses of an individual to a series of questions are used to design the cognitive style map. This map, divided into four categories—theoretical symbols, qualitative symbols, cultural determinants, and modalities of inference—demonstrate the preferred ways of organizing and processing information.

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[10]D. N. Nunney and J. E. Hill, "Personalized Education Programs," *Audiovisual Instruction*, (February 1970), p. 10-15.

During a series of workshops the faculty learned how to map one another, how to interpret the maps, and how to map instructional materials. Several faculty used the cognitive maps of students in planning learning experiences. The results of cognitive style mapping for 12 students enrolled in a senior-level nursing course indicated that this group preferred group discussion, lecture format, working with numbers, and reading the written word. The teaching strategies used in the course were compatible with these preferences, for instance, group discussions; "modified" lecture; use of films, videotapes and audiotapes; guest speakers; and review of various sources of literature.

A research study, funded by Sigma Theta Tau, is underway to answer the following questions: "Are there differences in the cognitive maps of transfer and non-transfer students?" "Are there differences between those nursing students who successfully complete each level of the curriculum and those who do not?" "Is there a pattern for cognitive mapping compatible with successful completion of the nursing curriculum?"

The task force did not envision that every faculty member would adopt cognitive style mapping; however, it anticipated that enthusiasm for cognitive mapping would spread among faculty members over a period of time.

- Several other project sites, e.g., *J. Sargeant Reynolds Community College, Valencia Community College,* discussed cognitive style mapping, or modification of the Nunney and Hill approach; however, they did not proceed with application in their respective settings. Consultants assisted faculty in understanding the approach and the implications for teaching strategies. These educators discussed their individual styles and practiced identifying cognitive styles, predicting problems, and projecting a teaching approach.

- The students and faculty at *Kentucky State University* gained valuable insight about themselves and others by using the Myers-Briggs-Type-Indicator (MBTI). The MBTI, a 166-item, self-report, forced-choice inventory, depicts how people prefer to use their minds. Although the MBTI is a very positive type of test, the nurse faculty recognized that results could be misused and misinterpreted. Therefore, the faculty participated in several workshops and other informal sessions as they developed plans to use the inventory. They discussed characteristics of the eight preferences—extroversion-introversion, sensing-intuition, thinking-feeling, and judging-perception—that form the 16 different types of the MBTI. These discussions helped them recognize the need to: (1) become aware of the different types of learners, i.e., global and linear, (2) arrange information in a manner that does not cause "cognitive strain" for either type, (3) provide definite guidelines, (4) provide options so that students can select the preferred style, and (5) determine the reading level of textbooks.

  Following workshop activities, the inventory was administered to all students and nurse faculty. The results showed that the majority of the students were linear learners, i.e., persons who like structure and information presented in a one-detail-at-a-time, step-by-step manner. When the nurse educators examined student performance in nursing courses, they discovered

the "linear" learners were encountering more academic problems than "global" learners, i.e., persons who prefer to know the "why" before the "what." The nurse faculty decided to implement the following changes:

(1) Use varied instructional strategies in nursing courses;

(2) Substitute textbooks when a lower readability level is appropriate;

(3) Introduce a linear learning system in fundamentals of nursing;

(4) Administer pre-tests before each unit to determine students' knowledge of material to be covered;

(5) Allow students an opportunity to choose assignments, e.g., team activities, independent work, programmed instruction;

(6) Provide students with objectives for each class.

Following implementation of the above changes the faculty noted that student retention rate increased and that students assumed greater responsibility for their learning. The faculty used the Lippincott Learning System, with some modifications to meet their needs.

- In addition to the above methods, some faculty employed other means for self-assessment by students. One form, an adaptation by Berquist and Phillips,[11] was used at the *University of Maryland at Baltimore*, *North Carolina Central University* and *North Carolina A&T State University*. The results suggested that the majority of students in these settings preferred the participant style, i.e., they wanted to learn the course content and assume responsibility for getting the most out of the class and class-related activities. Instead of administering inventories, other faculty held group discussions with the students who indicated a variety of preferences, e.g., small groups, independent study, lecture, visual aids.

Ethnicity

The faculty at the 20 project sites recognized that improving learning opportunities for students of diverse backgrounds depends upon awareness of the cultural diversities and the accompanying attitudes and values that either promote or inhibit interactions. Although persons of different ethnic groups work and live in close proximity, they frequently fail to recognize and value this diversity.

During the first regional conference, Sylvia Hart and Kathleen Conlon emphasized the importance of inferring correctly the meaning of specific behaviors in intracultural situations.

> As educators we need to understand the attitudes, feelings, and perspectives that students from other cultures bring to the teaching-learning situation. We need to appreciate and maintain the cultural uniqueness of students while providing the necessary education and skills to enable them to function and contribute. Since culture orders experience and guides behavior, we must be aware of these implications for learning.[12]

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[11]Bergquist and Phillips, *A Handbook For Faculty Development*, p. 33-36.

[12]Hart and Conlon, *Diversity: Cultural and Educational*, p. 6.

They pointed out that what many of the students, whose ethnicity served to distinguish them from the majority of the students enrolled in a nursing program, are experiencing is culture shock. The combination of the academic challenge and the burden of acculturation is more than many of these students can handle. This may explain the high attrition rate. Dr. Hart and Ms. Conlon asserted:

> Thoughtful preparation for these initial academic and clinical experiences may help to support performance during this period. Because familiar cues and the subtle, unspoken conventions of behavior with which they are familiar are changed, the satisfaction in the experience may not be there. The social events that provide encouragement, direction, and meaning no longer support behavior and the student may become frightened, disoriented, discouraged, or angry.[13]

Although caution is urged in using generalizations to describe or to interpret the behaviors of students from various cultures, faculty awareness of the values which different groups emphasize will enhance teaching and learning experiences. Often the values of these groups conflict with the institutional normative patterns of the dominant group in America. Students of different ethnic groups often encounter disapproval for unknown reasons. They are asked to learn many new things and to deny behaviors that may be old and familiar responses to common situations. Dr. Hart and Ms. Conlon posit:

> If it becomes necessary to change behavior patterns that are not congruent with the other culture, students may feel dishonest and insincere. They may feel that they are losing their personal values and they may question the price they must pay for the experience.[14]

The predominant minority groups represented at the project sites include black, Hispanic, native American, and Asian. Faculty discussions related to some of the sensitive and highly controversial issues specific to these groups. Sometimes referred to as consciousness-raising sessions, the discussions helped faculty recognize their own values and attitudes toward specific minority groups.

Although miconceptions and preconceived notions about students of diverse cultural backgrounds persist, faculty at some sites are examining some of the myths and false assumptions about different ethnic groups. Rather than continuing to avoid issues related to cultural influences, they are attempting to understand the sources of these assumptions, and are regathering evidence that will improve cross-cultural interactions.

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[13]Ibid., p. 5.
[14]Ibid., p. 6.

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- The nurse faculty at the *University of Maryland at Baltimore* conducted a series of workshops based on the belief that (1) faculty could "increase their ability to perceive correctly student behavior cross-culturally," (2) "the teacher must become sensitive to the incongruity between certain institutional standards and the needs of individual students," and (3) faculty and students need opportunities to "identify those aspects of the school culture which support or conflict with the students' expression of authenticity and autonomy."[15]

  Graduates who were of minority groups served as consultants and resource persons. They described their experiences as students in the School of Nursing and pointed out some of the subtle forms of discrimination or cultural "put-downs." These discussions triggered some behavioral changes among the faculty, who in many instances were unaware of the influence of cultural misconceptions on teaching practices and student-faculty interactions. Videotaped vignettes were used to initiate discussion of problem areas. Four vignettes were developed to: (1) increase faculty's ability to identify positive and negative cultural and ethnic behaviors that might affect learning, (2) identify teaching and learning strategies which may inhibit or enhance learning, and (3) stimulate discussion of behaviors exhibited by culturally diverse students.

  The vignettes depicted faculty with low expectations of the black student's writing capabilities, lack of sensitivity to the needs of the student from another country, and impatience with and lack of respect for the experiences of an older student.

- The nurse faculty at *Santa Fe Community College*, concerned about the language patterns of black students, conducted a series of workshops to become familiar with the communication styles of the black student population, the strengths of black families, and the variable lifestyles of the black population. As faculty examined their values and attitudes toward this group, communication networks within the faculty and student populations increased. Faculty, formerly reticent about initiating interventions with the black students, became more assertive in their efforts to find ways to assist these learners meet program goals.

- The nurse faculty at the *University of St. Thomas* conducted several workshops to improve their abilities to counsel students, particularly the black and Hispanic students. They discussed some of their beliefs, expectations, and perceptions of these groups. These discussions helped them to improve and increase interactions with these students.

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[15]Norma Rawlings and Ann Morgan, "Cultural Awareness," *Student Performance Evaluation: The Hidden Agenda in Nursing Education* (Atlanta: Southern Regional Education Board, 1979), p. 95.

Sex

Since nursing is a female-oriented profession, the admission of male students presents problems in some settings. Although most faculty espouse the belief that nursing programs should not discriminate against men who want to study nursing, their interactions in the academic settings often convey a different impression. Discriminatory practices, according to Richard M. VanGorder, are the major obstacles men encounter as students in a nursing program.[16] These practices are manifest in many forms, e.g., acts or communicated messages that emphasize the gender of the male and imply that he, as a nurse, is different from a female nurse.

Faculty at several project sites discussed some of their behaviors and attitudes that might be classified as discriminatory, e.g., "the man's point of view," sexual stereotypes, the need for brawn, preferential treatment. VanGorder contends it may be expedient for some female instructors to avoid teaching situations involving men since their negative feelings and inability to reconcile these feelings can be more detrimental than helpful.

Age

Enrollment patterns in many of the college-sponsored nursing programs reflect an increase in the number of "older" students. These students bring values, experiences, and orientations that differ significantly from the typical high school graduate usually admitted to programs. Faculty recognized the need for help in meeting the needs of these adult learners. It is important to understand their particular needs and their expectations. Harriett W. Cabell states that some adults become "angry or disoriented if everything is not systematically prescribed"; others, having been in the "adult roles of independent breadwinner or homemaker become angry and resistant when forced for too long a time into a dependent role."[17] The reservoir of experience adult learners bring to the learning situation can become a large resource for learning. Some faculty fail to respect or build upon these experiences.

Marital Status-Employment Status

There is an increase in the number of admissions who are married or employed (either full-time or part-time) or both. These learners present problems in terms of scheduling classes and class-related activities. In addition, family and work responsibilities inhibit learning opportunities. These students often lack adequate time and energy to prepare for academic and clinical assignments. Faculty at some sites discussed some of the underlying attitudes and values related to this subpopulation.

Summary

In summary, the learners of prime concern at the project sites represented different ethnic and academic backgrounds. Some were married, widowed, divorced, employed, and older than the typical student enrolled in the programs. Faculty examined many of the variables influencing student-faculty interactions. Becoming aware of these variables helped them address some

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[16]Richard M. VanGorder, "The Plight of Male Students," *Project Report* (May 1979).

[17]Harriett W. Cabel, "Expanding Opportunities for Adult Learners in the Southern Region: One Point of View," *Improving Undergraduate Education in the South*, William R. O'Connell, Jr., Ed. (Atlanta: Southern Regional Education Board, 1979), p. 16.

pertinent issues regarding teaching practices and curriculum design. In some instances, review of admission criteria and program requirements was equally important. This review provoked several pertinent questions: "What basic skills are needed for success in a program?" "Can a program adapt to meet the needs of students who may lack some of the basic skills for success?" "Can students achieve the objectives of the program and overcome basic skill deficits concurrently?" "Should a program that is unable (or unwilling) to provide flexibility in the curriculum and necessary support services admit students who will need these features?"

Campus and regional activities enabled faculty to:

help students become better prepared for academic work before entering the program;

collaborate more effectively with faculty in related disciplines and developmental studies programs;

help students cope more effectively with stress factors;

increase their awareness of the extrinsic and intrinsic determinants of motivation;

consider strategies to help students become more self-directed;

increase their awareness of cognitive styles and the implications of these styles for teaching and learning experiences;

become familiar with variations in the lifestyles and communication patterns of specific student populations;

become more assertive in efforts to find ways to assist learners of diverse cultural and educational backgrounds meet program requirements.

The Teacher

> The key to instructional improvement is the faculty. Faculty are primarily responsible for the quality of the instruction students receive and if they (1) hold positive attitudes about the capability of students, (2) are open to change and seek better ways to help students learn, (3) are skilled in teaching techniques and are competent both in the classroom and in their content areas, and (4) believe their teaching efforts will be rewarded, sound and exciting instructional programs can be assured.[18]

As stated earlier, the project aim was to assist nurse faculty, regardless of experience or academic preparation, to cope more effectively with the needs of students who differ from the typical student admitted to the nursing program. Project activities were designed to help the faculty examine their attitudes toward the targeted group of learners and the need for changes in approaches to teaching and learning. The diversity of students in the programs challenge traditional assumptions about goals and procedures. This challenge cannot be ignored if effective teaching and learning experiences are to be implemented. Sylvia Hart and Kathleen Conlon reminded the educators of the challenge during the first regional meeting and pointed out that diversities can serve

> . . . either as stumbling blocks or stepping stones. Our goal must be to use them as stepping stones. Through our collective commitment and effort, this goal can be achieved. Our students will be better served; they will experience more success; we will experience more satisfaction; and society will receive better health and nursing care.[19]

Many of the nurse educators at the project sites accepted the above challenge to use the variations among students as "stepping stones." Thus, activities were geared to assist the faculty become more aware of the particular needs, problems, and resources within the college setting to help students and faculty overcome barriers to teaching and learning.

The task forces used a variety of approaches to obtain the necessary information regarding faculty needs, interests, values, and concerns. Some task forces used the nominal group technique; others used assorted surveys and group discussions. The basic question at most of the project sites was: "What problems or obstacles prevent your meeting the needs of students of diverse educational and cultural backgrounds?"

Responses to this basic question indicated areas of faculty interest and concerns. These responses provided the framework for planning activities and determining the objectives for a particular site. For example, faculty concern about communication problems of students, disparities in educational goals, stereotyping of students, or the pressure of time to complete assignments signaled the need for activities that could help the faculty address these issues more effectively. Assertions that better testing and evaluation techniques, inservice training, peer critiques, improved mechanisms for sharing information, increased knowledge about teaching and learning styles and teaching strategies that would improve the quality of instruction provided clues for workshop foci.

A compilation of responses from various project sites (see Table 1) provides information about the changes nurse faculty believed were necessary to improve the quality of instruction in these settings.

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[18]Jeaninne Webb, "Improving Instruction for Undergraduates," *Improving Undergraduate Education in the South*, William R. O'Connell, Jr., Ed. (Atlanta, Georgia: Southern Regional Education Board, 1979), p. 36.

[19]Hart and Conlon, *Diversity: Cultural and Educational*, p. 19.

TABLE 1

Improving the Quality of Instruction in Nursing Programs

Suggested Changes	Number of Responses
Integrated curriculum for students	50
Better qualified faculty	35
Performance and curriculum evaluation	36
More clinical experience/Better objectives	9
Better students and student data	37
Knowledge about teaching strategies	40
Flexible time schedule	8
Media use training	7
Better communication	44

Differing values, expectations, and skills of the faculty also create stresses in academic settings. Frequently these causative factors are ignored since what teachers do in their classrooms or clinical areas is considered their business and is not usually open to discussion, challenge, or criticism. Kathleen Mikan points out the dilemma teachers face:

> The practice of sharing problems or successful teaching strategies among faculty colleagues is essentially nonexistent. Except for, perhaps, student teaching experiences, most teachers are expected to face their teaching problems alone. In fact, if a student teacher admits experiencing problems, that person is often viewed negatively, i.e., a sign of being inadequate or a poor teacher. This type of conditioning in teacher training programs results in teachers being careful of exposing their inadequacies and hesitating to ask colleagues for help. Teacher training of this kind stifles mutual sharing of problems, solutions, and cooperative inquiry among colleagues regarding teaching activities. Thus, most teachers are left alone to sink or swim, haze or be hazed, in their day-to-day teaching encounters.[20]

Skills

The manner in which the environment is manipulated to promote learning opportunities is dependent upon the skills of the teacher. According to Dr. Mikan the way "teachers present themselves in the classroom has tremendous influence on the learning atmosphere."[21] Dr. Mikan asserts the use of self in the classroom also influences the academic performance of the learner.

> In fact, there is a direct relationship between the teacher's self concept and success as a teacher and the academic performance of the learner. The more positive the perceptions teachers have of themselves and others, the more likely they are to be successful in the classroom. If teachers believe students can achieve, students are more likely to succeed.[22]

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[20]Kathleen Mikan, "Management of Teaching Strategies," *Student Performance Evaluation: The Hidden Agenda in Nursing* (Atlanta: Southern Regional Education Board, 1978), p. 86.

[21]Kathleen Mikan, "Affective Education in the Classroom," *Teaching and Learning: Selecting Strategies for Success In Nursing Education* (Atlanta: Southern Regional Education Board, 1980), p. 18.

[22]Ibid., p. 19.

Conducting classes, making assignments, testing and grading, directing work, counseling and advising, preparing means for independent learning are among the many activities teachers perform. The effectiveness of these activities is influenced by many forces, e.g., academic performance, teaching experiences, environmental conditions. According to Kenneth Eble, one learns by teaching, and one cannot teach except by constantly learning.[23] There is no one correct way to teach.

The skills of the nurse faculty at the project sites varied according to experience and academic preparation. Although many, as in most professions, lacked formal preparation for teaching, most had access to technology and participated in workshops on teaching skills. However, the pressures of time, teaching loads, and committee work inhibited self-reflection about what was happening in the class. Robert M. Barry claims few teachers "have the opportunity or desire to retreat from daily routines in order to be knowingly concerned with our approaches. We just teach!"[24] The project provided an opportunity for the nurse faculty to "retreat" for some needed self-reflections.

The faculty were encouraged to consider the appropriateness, efficiency, and effectiveness of their actions and to examine the instructional problems specific to the nursing program and target student populations. During workshops and informal sessions faculty discussed the characteristics of effective teaching, e.g., knowledge and organization of subject matter, ability to classify and point out relationships, and considered their attitudes toward the need for change in teaching behaviors. Some faculty participated in exercises to explore their teaching styles; others completed self-assessments and inventories designed to map or type particular styles.

A compilation of responses of nurse faculty at various project sites indicated that most agree there is no one style of effective teaching and that teaching is learned. For example, 92 percent (N=323) of the respondents agreed that teaching is a learned set of activities.

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[23]Kenneth E. Eble, *The Craft of Teaching* (San Francisco: Jossey-Bass, Inc., Publishers, 1977), p. 8.

[24]Robert M. Barry, "Classifying Objectives," *On College Teaching*, Ohmer Milton, Ed. (San Francisco: Jossey-Bass, Inc., Publishers, 1978), p. 8.

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- Some of the faculty at the *University of Alabama in Birmingham School of Nursing* completed the cognitive style mapping inventory used with the students. The maps were indicators of teaching and learning styles.
- All of the faculty in the department of nursing at *Kentucky State University* completed the Myers-Briggs-Type-Indicator inventory. They shared and discussed their types with colleagues and students.
- The faculty at several sites, e.g., *North Carolina A&T State University, North Carolina Central University, Valdosta State College, Albany State College*, completed the Teaching Typology in *A Handbook for Faculty Development*.[25] This typology allowed the participants to indicate the extent to which their teaching conformed to each of six categories of teaching styles developed by Richard Mann. Generally, the style most like that of educators is as facilitator. The faculty realized however, that the teaching styles of most educators are composites of the six styles.
- The faculty in the division of nursing at *Albany State College* used the S-C Teaching Inventory, developed by Morris S. Spier, to obtain information about themselves as teachers. This inventory consists of 40 items aimed to show whether teachers are oriented to content or students. The overall orientation of nurse faculty in this setting was toward students.

Values

A value is defined as "a preferred or important quality, characteristic, attribute, or property."[26] Most faculty represent the values of the dominant culture and symbolize community standards that may or may not reflect the needs of all community members. Thus, they interface with the student and faculty populations as products of a culture and components of a system. It is important to know their particular values and how these influence decisions regarding teaching and learning situations. Among the frequently cited characteristics that nurse faculty at several project sites value about themselves as teachers are: knowledge, experience, flexibility, communication skills, and organizational skills.

- During formal and informal sessions nurse faculty at a few of the project sites, e.g., *Texas Christian University, J. Sargeant Reynolds Community College, University of St. Thomas*, discussed values specific to the teaching and learning experiences in the nursing programs.

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[25]Bergquist and Phillips, *A Handbook for Faculty Development*, p. 20-22.

[26]Gus T. Dalis and Ben B. Strasser, *Teaching Strategies for Values Awareness and Decision Making in Health Education* (Thorofare, New Jersey: Charles B. Slack, Inc., 1977), p. 7.

Motivation

The reasons for electing to teach are important factors to consider in identifying the motivational levels of faculty. Those intrinsic and extrinsic factors mentioned earlier in the discussion about the motivation of students are applicable to the faculty. For some faculty members, motivation stems from the satisfaction derived from teaching, i.e., the challenge of helping students acquire those skills necessary for competency in the profession; others are motivated primarily by the monetary and social rewards. Generally, a combination of these factors is important in sustaining high levels of motivation.

Some faculty often seem to lack motivation to provide the kinds of experiences students require or the program demands. They, as do students, fail to see the relationships between their behaviors in the academic settings and the desired outcomes and blame the "system" or claim proposed changes might work "if" or "but." The heavy teaching and clinical assignments, institutional and program constraints, and high turnover of faculty compound these problems.

Strategies, similar to those proposed for students, can help faculty overcome these difficulties. Faculty members deserve appropriate praise, recognition, and encouragement for their varied contributions. Failure to provide these rewards can be a demotivating factor.

- Several programs, e.g., *Santa Fe Community College, University of Alabama in Birmingham,* awarded continuing education units (CEU) to faculty who participated in the campus workshops. Granting the CEU helps to promote and sustain interest and involvement.

During the last regional meeting, Sylvia Hart, Chairman of the Executive Committee for the Council on Collegiate Education in Nursing, commended task force members for the time and energies invested in project activities, and presented a certificate to each person who served as a task force leader.

Commitment

Commitment refers to the position one takes on an issue. The determinants of the position taken on an issue are multiple and complex. They include the values, beliefs, and attitudes of individuals, groups, and society. The commitment of faculty to the project and to the targeted student populations was essential to the regional endeavor. Most faculty members are committed to helping students learn. However, a recent nationwide study suggests commitment to the minority students is "seriously lacking in many schools."[27]

Commitment to the minority student, for instance, does not infer commitment to lowered standards. Rather, it implies: (1) willingness, on the part of the faculty to provide learning options and curricular flexibility, (2) an unwavering belief that students of minority groups can learn and become productive members of the profession, (3) respect for the minority students as individuals, and (4) recognition of the varied forces that prevent access to educational opportunities and equity for some groups. Commitment to help students of diverse cultural and educational backgrounds develop their potential to become competent registered nurses cannot be decided in a haphazard or superficial manner. It is a vital factor in promoting educational opportunities and merits attention prior to the initiation of activities to facilitate the

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[27]John Buckley, "Faculty Commitment to Retention and Recruitment of Black Students," *Nursing Outlook* (January 1980), p. 46-50.

admission, retention, and graduation of diverse groups of students, particularly minority students. Therefore, if acceptance of the students is questionable, it is best, for students and faculty, to refrain from recruiting and admitting these students.

The project provided a catalytic influence throughout the region that forced nurse educators, either individually or in groups, to reconsider their commitment (or lack of) to students of diverse cultural and educational backgrounds. Faculty discussed attitudes and behaviors that were formerly ignored or denied. They considered whether or not their behaviors demonstrated "an aggressive acceptance" of minority students or mere "lukewarm tolerance of their presence and efforts."[28]

This regional endeavor helped many faculty, who were frustrated and discouraged because past retention and recruitment efforts failed, to reaffirm their commitment to students. It reinforced vital communication networks throughout the SREB region. Sharing information about positive outcomes in other settings and clarifying misconceptions about commitment helped to decrease resistance of some faculty who were "fed up," believed "enough has been done," or feared standards "will be lowered and the school's reputation ruined."

The nurse administrative heads and task force leaders in the programs were key people in establishing an appropriate climate for faculty discussion and promoting participation in and commitment to project activities. Although leadership styles varied, the influence of these individuals was manifest in all phases of activities, e.g., the participatory levels of faculty, the established campus goals, communication patterns, quality and number of workshops.

Summary

In summary, campus and regional activities provided opportunities for nurse educators to:

examine their attitudes toward the targeted group of students;

become more aware of the resources available within a particular setting;

consider the appropriateness, efficiency, and effectiveness of their actions;

examine instructional problems specific to the nursing program and to the targeted student populations;

become aware of their teaching styles and the implications of these styles for teaching and learning;

discuss personal and professional values and the influence of these values on decisions regarding teaching and learning situations.

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[28]Hazle Blakeney, "Dimensions of the Teacher's Role." *Faculty Development in Nursing Education* (Atlanta: Southern Regional Education Board, 1978).

The Instructional Process

This section describes some of the strategies used (or considered) to deliver the curriculum to students. The curriculum, content of the discipline, and the process by which the content is made available to learners are the key elements of instruction. The traditional faculty role has been to choose the content and present it to students via lectures, reading assignments, or classroom recitation and discussion. These are the primary formats used by most nurse educators. As Kathleen Mikan points out, "the rapid growth and development of educational technology in our society has had little impact on the manner in which teachers teach."[29] However, the diversity of student populations prompts a search for more effective ways to help students meet curriculum goals.

The faculty development project provided an opportunity for nurse educators to exchange ideas about effective instructional methods through working with persons having expertise in instructional development. Realizing that students learn when they become active participants in the process, the faculty at project sites considered some of the factors influencing student activity.

Influencing Factors

The possible physical arrangements of classrooms or areas to be used in teaching and learning situations influence the kinds of experiences that can be planned and implemented. Limitations of physical facilities impose constraints on teaching strategies and achievement of course objectives, e.g., inability to rearrange seating, inadequate seating accommodations for student enrollment. Faculty often have little control over the facilities. Thus, they are challenged to modify strategies in order to accomplish specific goals. Eble contends that teachers should not be "cowed by customs, colleagues or janitors into accepting neat rows and files of chairs that are the classroom norm."[30] Rather, they, with the students, can create effective classes despite the limitations imposed by space. Nurse faculty often contend with these limitations, both in the college setting and in clinical settings where space for classes or pre- and post-conferences with students is unavailable or inadequate.

Kathleen Mikan claims "No matter how excellent the teacher may be, or how important the content, the teacher must capture the attention of the learner before he can receive the message."[31] Among the techniques proposed are demonstrations, use of media, asking questions, or telling jokes.

Since learning results from the interaction of people with their environments, student involvement is essential to the implementation of an effective instructional method. According to Mikan:

> One of the simplest methods is to ask questions, either of a specific individual or just anyone in the classroom. Another technique is to ask all class members to write their answers to a specific oral question and then share views on their answers.

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[29]Kathleen J. Mikan, "Management of Teaching Strategies," *Student Performance Evaluation: The Hidden Agenda in Nursing Education* (Atlanta: Southern Regional Education Board, 1978), p. 87.

[30]Kenneth E. Eble, *The Craft of Teaching*, p. 27.

[31]Kathleen Mikan, "Affective Education in the Classroom." *Teaching and Learning: Selecting Strategies for Success in Nursing Education* (Atlanta: Southern Regional Education Board, 1980), p. 13-14.

> Small group activities are also excellent ways to involve everyone. Asking for reports from each group, or asking one group to critique another group's report, will also increase and sustain involvement. Another way is to ask students to actually do the teaching, or make reports of their own experiences. For some reason, students will listen more closely to a peer than the teacher, at least for a while. Individuals should not only participate in the learning experience, but they should also be able to defend the actions they took. For example, students should not only observe other people make decisions but, where possible, they should commit themselves to making a decision and then explaining why they made the choices they did. This technique is very effective in gaming, simulation, and moral development learning situations, and results in heightened affective awareness.[32]

Establishing a good atmosphere for a class is an important aspect of sustaining student attention and involvement. If teaching is viewed as pleasurable, according to Eble,[33] faculty will communicate that sense to students. Faculty establish the temper of a class by their posture and gestures, remarks and anecdotes, and manner of handling questions.

Campus workshops and regional meetings helped the faculty at the project sites recognize the effectiveness and appropriateness of various instructional strategies, e.g., lectures, simulations, multisensory instruction, PSI, instructional modules. Some faculty were able to experiment with innovative approaches; others improved the use of familiar or traditional methods. The faculty recognized that no one method is *the* correct way to solve instructional problems, though some faculty wanted "the strategy that really works."

Data from several project sites were compiled to show faculty utilization of and interest in learning more about alternative instructional methods. Table 2 depicts these findings.

Selected Strategies

Among the instructional strategies explored at various project sites were lecture, simulation, and multisensory instruction.

Lecture method. Eble asserts this method persists in college teaching because "it is the easiest thing to do; it is the accepted thing; it is the safest." He believes teachers pay too little attention to what good lectures might accomplish.[34] Kathleen Mikan used the following guidelines, adapted from Coolie Verner and Gary Dickinson, "The Lecture, An Analysis and Review of Research" (*Adult Education*, Winter, 1967, p. 94-95), in a recent workshop at Georgia College:

The lecture is a suitable technique when:

> the basic instructional task involves the dissemination of information;
>
> the information to be imparted is nowhere else available;
>
> a segment of content material must be organized and presented in a particular way for a specific group;
>
> the establishment of learner interest in a subject is an indispensable aspect of the learning objective;

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[32]Ibid., p. 15.
[33]Kenneth E. Eble, *The Craft of Teaching*, p. 37.
[34]Ibid., p. 42.

TABLE 2

Interest in Instructional Methods

Method	Number Who Have Used	Number Who Have Used, Want to Learn More	Number Who Have Not Used, Want to Learn About
1. Lecture	221	91	5
2. Group discussion	185	123	6
3. Team teaching	115	91	24
4. Interdisciplinary, problem, or theme teaching	58	54	125
5. Use of the community as a learning laboratory	150	72	49
6. Independent, tutorial, or contracted study	123	89	66
7. Experiential learning, gaming, simulation	79	106	107
8. Individual research or artistic project	113	55	68
9. Group research or project; Use of students as teachers or discussion leaders	166	37	77
10. Self-paced instruction, Personalized System of Instruction (PSI)	79	124	55
11. Use of audio or visual media	180	15	118
12. Other, please specify	0	0	0

N = 266

the content material presented is needed only for short-term retention; and

introducing an area of content or providing oral directions for learning tasks that will be pursued and developed through some other instructional process.

The lecture is not a suitable technique when the:

instructional objective involves any form of learning other than the acquisition of information;

instructional objective involves the application of skills or information;

content material is complex, detailed, or abstract;

learner participation in the learning activity is crucial to the achievement of the objective;

instructional objective requires the analysis, synthesis, or integration of the material acquired;

intelligence level and educational experience of the learners are average or below;

learning task involves the initiation or alteration of attitudes, values, or behavior;

information acquired must be available through long-term retention.

The lecture method can be improved by insuring:

the number of major points presented is not excessive;

summaries are presented at the beginning and at the end;

the material presented is meaningful to the learner;

verbal illustrations used to establish meaningfulness coincide with the experience of the learner;

the length of the presentation does not exceed thirty minutes;

the sentences are short and the language and style are simple;

the speed of delivery is adjusted to the complexity of the material and the experience of the learner; and, finally,

the lecture is augmented by instructional devices and/or techniques which provide for learner participation.

Simulation. In simulations students adopt roles they will perform in real life. Situations are based on learning objectives and can be designed for group or individual activity. Students are actively involved in this process, interacting with people or materials. Shirley Dooling advised faculty during the third regional meeting to:

> . . . decide what specific competencies are to be developed or measured at each level of education and experience. Once this decision has been made, the most appropriate technique must be selected for students to perform the simulated task representing as closely as possible the real-life situation.[35]

Michale J. Rockler points out that a unique aspect of the method is that it allows for individualization of instruction. For example, concrete experiences are provided for the slow learner. Average learners may examine some aspects in more depth; advanced students may examine sophisticated strategies and alternatives. Moreover, these learners can be involved in the learning experience at the same time.[36]

Multisensory instruction. A variety of media forms are used to coordinate study. Learning modules guide the student in using learning aids to meet specified objectives. Students are placed in control of their learning experiences. Ideally, the learner can select from different modes of learning and interact with various media forms.

The priority needs of each site determined the focus of the campus workshops. Some faculty gave priority to the process, i.e., the methods used to present the curriculum; at other sites attention was directed primarily to the curriculum and the arrangement of control.

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[35]Shirley Dooling, "The Use of Simulated Learning Experiences in Teaching and Evaluating Clinical Nursing Practice," *Teaching and Learning: Strategies for Success in Nursing Education* (Atlanta: Southern Regional Education Board, 1980), p. 83.

[36]Michale J. Rockler, "Applying Simulation/Gaming," Ohmer Milton, Ed. *On College Teaching* (San Francisco: Jossey-Bass, Inc., Publishers, 1978), p. 296-297.

EXAMPLES

- After a recent workshop at *Georgia College* the faculty identified plans to increase student involvement, accountability, and feedback specific to each nursing course. The consultant, Kathleen Mikan, professor and director of the Learning Resource Center (University of Alabama in Birmingham School of Nursing), utilized various teaching strategies during the workshop, e.g., pre-testing, audiovisuals, lecture-discussion, to demonstrate advantages and disadvantages of each method.
- A workshop on the multisensory approach to learning at *Tidewater Community College* presented an approach that has been successful in many educational programs. Betty A. Allen, associated professor and coordinator of the Nursing Multisensory Laboratory (Pensacola Junior College), used a module on multisensory learning to introduce the concept and approach.
- Among the instructional strategies implemented by faculty at *North Carolina Central University* were: (1) simulation, (2) utilization of vignettes in community nursing, (3) videotapes, (4) competency-based education format at the junior and senior levels in nursing.
- At *Valdosta State College* faculty examined the conceptual framework of the nursing curriculum to determine more specifically those competency levels expected of students as they progressed through the program. Various organizing models were discussed with Susan Leddy, chairperson and professor of Nursing (Mercy College), in one workshop. In another workshop Joyce Y. Parros, dean of Nursing (Southeastern Massachusetts University), helped the faculty relate the general systems approach to analysis and design of instruction to the nursing curriculum. During these discussions the faculty selected central concepts, identified related behavioral expectations, and described appropriate teaching strategies.
- Highlighting the teacher's and student's perspective, Raymond R. Shrader, professor of Psychology (University of Tennessee at Knoxville), discussed the merits and drawbacks of Personalized System of Instruction (PSI) with the nurse faculty at *Lincoln Memorial University*. The faculty reviewed and clarified course objectives for each nursing course following the workshops with Dr. Shrader and Kathleen Conlon, assistant professor of Nursing (University of Tennessee at Knoxville).
- Faculty at the *University of St. Thomas* participated in several workshops on evaluation resulting in the development of a faculty handbook on test construction and clinical evaluation tools.
- Some nurse faculty at the *University of Tennessee at Nashville* participated in a series of workshops on "Basic Instructional Media Production and Utilization Skills" offered by the university.

Summary

Workshops and consultations centering on the instructional process helped the nurse educators:

recognize factors influencing student activity in the academic setting;

identify plans for increasing student involvement;

review and clarify course objectives;

recognize the merits and drawbacks of some teaching strategies, e.g., Personalized System of Instruction, Multisensory Instruction, Simulation;

determine more specifically the competency levels expected as students progress through the program;

improve the use of traditional or familiar teaching methods;

experiment with different teaching approaches.

Project Evaluation

Although the length of the project period constrained efforts to evaluate the activities completely, the responses of faculty and the observations of assigned evaluators and project staff are important indicators of the outcomes. It is anticipated that lowered attrition, increased retention, and graduation of students from diverse cultural and educational backgrounds will be additional manifestations of the project's influence at those sites involved in this endeavor.

Evaluation Procedures

Evaluation Team

A five-member team,[37] appointed by the Southern Regional Education Board in 1977, assisted the project staff and task force members in assessing the effectiveness of project activities. Each of these members, with expertise in higher education, nursing, and research, was assigned four sites to visit throughout the three-year period. Each evaluator made one-day visits to the assigned sites each year. During these visits they conferred with the nurse administrative heads, task force leaders, task force members, and nurse faculty.

Evaluation Forms

Evaluation forms, developed by the project staff, were mailed to the 20 task force leaders in September 1979 for distribution to task force members and nurse faculty. (Copies of the forms are in Appendix C.) The nurse administrative heads were asked to specify the "most important accomplishment resulting from the Faculty Development in Nursing Education Project." The reactions of 15 task force leaders, 53 task force members, 132 nurse faculty and 14 nurse administrative heads provided relevant data about the project's impact.

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[37]Members were: Kathleen Conlon, Assistant Professor of Nursing, University of Tennessee (Knoxville); Elnora Daniel, Coordinator, Master's Program in Nursing, Hampton Institute (Hampton, Virginia); James O. Hammons, Professor of Education, University of Arkansas (Fayetteville); Sylvia Hart, Dean of Nursing, University of Tennessee (Knoxville); Sue Legg, Assistant Director of Testing, University of Florida (Gainesville).

Evaluation Results

Accomplishments

As mentioned earlier, the overall purpose of the three-year grant was to provide opportunities for nurse faculty to (a) identify learning problems, (b) study alternative learning strategies, (c) present instruction appropriate to the learning styles of students, and (d) recognize, respect and adapt to cultural differences. As shown in Table 3, a majority of the respondents agreed with the statement that the objectives were met.

TABLE 3

Reactions To: *"The project objectives established at this campus were achieved."*

	Number of Respondents	
	Task Force Members	Nurse Faculty
Strongly Agree	17	21
Agree	30	94
Disagree	3	8
Strongly Disagree	—	—
No Response	3	9

N = 185

Several of the respondents mentioned the need for more time to apply and validate some of the ideas and strategies discussed during various meetings and workshops. Other comments noted an increase in faculty awareness of student characteristics and needs. In contrast, mixed success was observed by four respondents who reported they have "worked at identifying needs and problems" but made little progress in resolving the problems, i.e., "faculty have continued to teach in the same ways."

Table 4 shows the reactions of task force members and nurse faculty to selected items on the questionnaire. The responses indicate whether the respondents believed the project provided opportunities for them to achieve the stated objectives, e.g., identify learning problems, learn about instructional methods, become familiar with activities at other colleges, or improve teaching skills.

Among the faculty comments were:

> *The exchange of ideas through regional conferences was extremely beneficial. Campus communication and sharing were enhanced through the interdisciplinary team.*
>
> *The workshops have been extremely valuable in the development of faculty skills in counseling, test and measurement, clinical evaluation, and gave us an opportunity to learn from experts and each other.*
>
> *The project helped me especially in the areas of identifying learning difficulties and in counseling students who are having difficulties.*

TABLE 4

Reactions of Task Force Members and Nurse Faculty To Selected Survey Items Regarding Project Activities

Items	Strongly Agree	Agree	Disagree	Strongly Disagree	No Response
2. The project activities, i.e., campus and regional activities, provided an opportunity to:					
2.1 identify learning problems	57	116	6	1	5
2.3 increase knowledge of learning styles	62	101	17	1	8
2.4 increase awareness of cultural differences	74	84	18	3	6
2.5 learn about instructional methods	36	116	25	1	7
2.6 try different teaching methods	36	93	47	1	8
2.9 examine values and beliefs	61	104	12	3	5
2.11 share ideas about effective strategies	38	111	25	4	7
2.13 improve teaching skills	36	116	25	2	6

N=185

One of the most important outcomes of the workshops sponsored by SREB was learning what colleagues are doing in their settings to meet challenges which are common to our program.

I think increasing faculty awareness of our student problems and ways to identify and cope with them justified the project.

The project has been extremely effective for the nursing faculty and has had considerable "spill over" to other faculty and students.

In responding to the question, *In your opinion, what is the most important accomplishment at this site resulting from the Faculty Development in Nursing Education Project?* several nurse administrative heads identified:

. . . an understanding that needs of the culturally diverse student can be accommodated while maintaining standards.

. . . the opportunity to discover and utilize resources and expertise of faculty within our own university.

. . . increased interest to create and offer learning opportunities to bridge gaps in our curriculum.

. . . an appreciation of the need to develop teaching strategies congruent with the cognitive learning styles of students.

. . . an increase in faculty sharing of their thoughts and feelings when teaching and counseling minority students.

. . . awareness of the need for varied opportunities or ways for the student to learn.

Most of the nurse administrators stated that it was difficult to identify only one accomplishment and generally mentioned several outcomes related to the project.

A majority of the task force members, approximately 54 percent of those responding, cited the identification of learning styles as a significant accomplishment. Other accomplishments included revisions in the curriculum, changes in admissions policies, identification of faculty strengths and weaknesses, and discussions of faculty values. The following comments of task force members illustrate some of the responses:

Better communication between faculty and students.

Assessing entry skills of students and exploring possibilities to help students with deficiencies.

Alternatives in teaching practices were initiated.

Improved evaluation practices.

This project has forced people to reconsider their thinking about teaching and learning.

In response to the question, *What did the project contribute to your faculty's and program's growth and development?* five of the task force leaders stated an increase in knowledge and awareness of teaching and learning styles; four task force leaders mentioned increased awareness of attitudes and values. According to one task force leader it was "too soon to tell"; another reported "very little."

Table 5 illustrates the responses of task force leaders to the question: *In what ways do you think participation in the project affected relationships with your students?*

TABLE 5

Responses of Task Force Leaders Regarding Project Influence on Student Relationships

	Number of Responses
Appreciation of Differences	6
Attitudinal Changes	6
No Response	3

N = 15

It appeared that appreciation of differences and changes in attitudes toward students improved relationships between students and faculty. A majority of the task force leaders (57 percent) reported no change in the retention of minority students during the three-year period; 28 percent reported an increase in the retention rates.

A majority of the nurse faculty (61 percent) reported changes in teaching practices during the conduct of the project. Faculty reported using the following methods to enrich learning experiences: media, modules, conceptual teaching, tutoring, increased student participation, and laboratory experiences. Many of the comments suggest that increased awareness of student needs and cultural differences influenced changes in teaching practices.

The responses of 64 nurse faculty document the development of several spin-off activities or special interest groups as a result of the project. Reportedly, some faculty reviewed and revised curricular plans and course objectives, examined evaluation procedures, initiated a student development committee, or spent additional time exploring teaching strategies and cognitive styles. Table 6 shows some of the special interest groups or activities generated.

TABLE 6

Special Interest Groups or Activities Generated by Project

Group or Activity	Number of Responses
Faculty Tutors	5
Curriculum Revision	27
Management by Objectives	5
Student Development Committee	7
Testing	7
Teaching Strategies	6
Cognitive Maps	7

N = 64

Reports from the assigned evaluators and the project coordinator also highlight accomplishments at the sites. Positive outcomes identified by these visitors include: improved collegial and peer relationships, reduction in academic attrition among students, increased utilization of various instructional strategies, increased faculty awareness of individual approaches to learning, and increased awareness of the needs of the targeted student populations. The project "made available resource persons not otherwise available," "facilitated cross fertilization of ideas with faculty from other institutions," "increased utilization of available resources," and "improved faculty morale, cohesiveness and confidence."

The evaluators note the following characteristics of programs implementing effective activities:

- Accountability on the part of the nurse administrative heads and task force leaders.
- Consistency in task force membership.
- Involvement of nurse faculty in all phases of the program, e.g., planning, implementing, evaluating.

Significant Problems

Table 7 summarizes the significant problems identified by task force members. These problems concur with observations of the evaluators.

A majority of the responses (52 percent) suggest that time is the biggest problem. Comments of respondents attested to this problem area. For example,

Additional time is needed in order to fulfill the goals faculty established.

There are many areas we would like to pursue as we try to establish an environment optimal to the learning process of the total population.

Continuing this project will help us improve counseling techniques with students at risk of failure.

TABLE 7

Significant Problems Identified by Task Force Members

Problem	Number of Responses
Time	18
Money	6
Adjusting to Students	5
Lack of Campus Concern	2
Loss of Focus	1
Faculty Turnover	1
Identifying Teaching and Learning Styles	1
No Response	19

N = 53

We need more time to identify areas in our curriculum that can be altered to aid the progression of some students through our program.

Our goals were realistic, but the time period for achievement of goals was too short.

Need more time for using information and strategies in order to see concrete behavior changes in faculty.

We have identified our problems, but need more time to achieve the objectives.

There is much that now must be applied.

Except in a few cases, release time was not provided task force leaders or the faculty to participate in the project activities. Therefore, scheduling workshops and other planning sessions became problematic. Other problems mentioned by the respondents include:

lack of funds to implement techniques learned

initial faculty apprehension

insufficient funds for consultants

difficulties in organizing activities

Proposed Changes in Scope of Work

Changes proposed by task force leaders if the project were repeated are shown in Table 8. Most of the leaders (78 percent) indicated that the overall goals were realistic and attainable. However, they asserted the time period for achievement of the goals was too short, i.e., insufficient time for using information and strategies in order to see concrete behavioral changes. The changes proposed in the campus objectives directed more attention to the curriculum or teaching strategies.

Changes in regional activities refer primarily to the inclusion of more nurse faculty, increased interaction between programs in close proximity, e.g., state meetings, and the inclusion of learners. Most of the leaders agree that the regional activities were appropriate and effective in maintaining the communication network between institutions.

Other comments indicative of changes in the scope of work include:

involve top administration more actively

hold two-day workshops instead of one

plan workshops off campus

TABLE 8

Proposed Changes in Project Activities

	Number of Responses
Overall Objectives:	
Change	1
No Change	12
No Response	2
Campus Objectives:	
Change	8
No Change	5
No Response	2
Regional Activities, i.e., meetings, newsletters, consultations:	
Change	13
No Change	1
No Response	1
Campus Activities, i.e., workshops, emphases	
Change	10
No Change	5
No Response	0

N = 15

increase the number of workshops

change composition of task force

provide release time for task force leader

Several respondents observed the need to increase the consultation fees and to provide funds for secretarial and duplication costs at the project sites.

Plans For Continuing Project Activities

The formats for continuing the faculty development activities are illustrated in Table 9. These formats are important vehicles for maintaining faculty interest and participation in activities designed to improve teaching and learning experiences.

TABLE 9

Proposed Formats for Continuing Activities

Format	Number of Responses
Inservice	7
Committee	3
Other Projects	2
No Response	3

N=15

Summary

The preceding sections describe the major foci and some of the accomplishments of the Faculty Development in Nursing Education Project, a three-year grant funded by the Division of Nursing, U.S. Department of Health, Education, and Welfare and sponsored by the Southern Regional Education Board. This grant, initiated in March 1977, provided opportunities for nurse faculty at 20 college-based nursing programs to enhance their teaching skills and ultimately improve learning experiences for students of diverse cultural and educational backgrounds.

Task forces, appointed by the nurse administrative head at each site, planned and implemented campus activities specific to the needs of respective nurse faculty and congruent with the overall goals of the project. The formats used to assist faculty in improving teaching skills included workshops, seminars, consultations, regional meetings, and publications. The regional meetings and other activities, i.e., site visits, newsletters, were designed to reinforce campus activities. These activities helped to maintain important communication networks throughout the SREB region.

The evaluation results attest to the effectiveness of this project as a model for directing attention to attitudinal and procedural barriers that inhibit the educational experiences of students from diverse cultural and educational backgrounds. This model provides experiences faculty need in order to develop the level of awareness and the kind of commitment essential to effective programs for students who are under-represented in nursing education.

Although it is difficult to evaluate the overall effectiveness of the project, the reactions of persons involved in the activities indicate that the objectives were achieved. Changes occurred in teaching practices and in communication patterns among faculty at various sites. These changes are correlated with increased awareness of student needs, learning styles, and available resources in the academic settings. Although a majority of the task force leaders report no change in student retention rates, i.e., for the minority students, increases were reported by some faculty and nurse administrative heads. In fact, one nurse administrative head attributed an 11 percent increase in pass rate on the licensing examination to project activities.

The constraints of time and other responsibilities, e.g., graduate study, preparation for acccreditation visits, teaching and committee work, and pressures from administrative and regulatory bodies, influenced productivity at some sites. Since release time was not provided, faculty lacked time for planning and participating in workshops. Therefore, management skills were important determinants of effective programming at the sites. Despite the pressures of academic responsibilities and lack of extrinsic motivational factors, e.g., release time and financial rewards, faculty at most sites became involved in project activities and, in a few instances, initiated spin-off activities.

The catalytic influence of the project is manifest in the plans for continuing the activity following termination of the grant as well as in the spin-off activities generated during the project period, e.g., development of proposals for research activity, enrichment activity, curricular

study. Most sites presented plans for continuing the project with emphasis specific to the setting. The formats for implementation of these activities include continuing education committees, inservice education programs, special projects, and staff development programs. The faculty at these sites anticipate that continuing activities will assure achievement of the ultimate goal, i.e., decreased student attrition and increased retention of students from diverse educational and cultural backgrounds.

This regional endeavor reaffirms the need for project activities similar to those executed in the current grant. Improving teaching and learning experiences in nursing for students of diverse cultural and educational backgrounds is contingent upon the kinds of staff development experiences provided the nurse faculty. The determinants of program effectiveness and efficacy include:

Leadership. The nurse administrative head and individuals selected or appointed to assume responsibility for activities are key people in eliciting faculty participation and organizing the program plans. Success is correlated with the skills of these persons in organizing program plans.

Commitment. Unless faculty, administrators, and students are committed to program plans, activities will be ineffective. A core group of committed persons is necessary for program success.

Support. This component must be manifest at administrative, faculty and student levels. The provision of release time, financial support, needed physical resources, and appropriate recognition for efforts to enrich learning experiences helps to promote (and sustain) faculty involvement in activities.

Communication. It is important that faculty be informed about project activities and have opportunities to give input in the planning stages of activities. Since the amount of time available for meetings may be limited, informal gatherings of the faculty may become important vehicles for the dissemination of information. Persons in leadership roles must be sensitive to the needs of faculty and the timing for introducing new ideas or eliciting feedback.

Clarity of goals. The development of realistic and obtainable objectives that address the pertinent needs of the faculty is essential. The objectives help to determine the appropriate formats for assessing the accomplishments.

These components are basic to initiating (or continuing) successful activities.

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Appendix A

Roster of Task Force Members

- **Albany State College**
  Albany, Georgia

  *Mirian L. Johnson, *Assistant Professor, Nursing*

  Robert Marshall, *Director of Institutional Research*

  Ruth Pyle, *Assistant Professor, Nursing*

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  Barbara Tiller, *Assistant Professor, Education*

  Betty Washington, *Assistant Professor, Biology*

  Evelyn Wilkerson, *Nurse Tutor, Nursing*

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  Lucy A. Butler, *Instructor, Psychology*

  Mary R. Connelly, *Instructor, Mathematics*

  Joan Crosthwait, *Instructor, Practical Nursing*

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  Gloria Perez Pickar, *Instructor, Nursing*

  David Skinner, *Instructor, Psychology*

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*Task Force Leader
**Now Tennessee State University

Appendix B

Proposed Campus Objectives*

- **Albany State College**

  Identify the dominant learning styles of faculty and students indigenous to this area

  Identify the teaching styles of the nurse faculty

  Discuss the implications of the varied styles for teaching and learning

  Initiate necessary alternatives in teaching practices to enhance teaching and learning

- **Daytona Beach Community College**

  Improve teaching skills necessary for:
  a) diagnosing learning problems
  b) recognizing, respecting, and adapting to cultural differences

- **Georgia College**

  Improve teaching skills necessary for:
  a) diagnosing learning problems
  b) identifying testing obstacles

- **Kentucky State University**

  Identify preference for various instructional strategies

  Identify student learning style

- **Lincoln Memorial University**

  Increase faculty awareness of the learning needs of specified students

- **North Carolina A&T State University**

  Present instruction appropriate to the learning styles of students

- **North Carolina Central University**

  Improve teaching skills

  Identify student learning problems and difficulties

  Identify barriers to learning

  Provide a climate for open, candid and relevant communication between faculty and students to enhance the teaching-learning process

- **Polk Community College**

  Identify learning difficulties of students

  Determine effective alternative teaching strategies

*Note: These objectives were developed in 1977.

- **J. Sargeant Reynolds Community College**

  Gain information about culturally different students as a basis for enhancing their learning environment

  Increase the skills of the faculty to identify learning needs, styles, problems of the student who is culturally different

  Provide an opportunity to gain information and skills in various teaching methodologies that would be of benefit to students with various learning styles

  Implement and evaluate teaching skills gained as a result of participation in faculty development activities

- **Santa Fe Community College**

  Sensitize health-related faculty to needs of students from different cultural backgrounds

  Increase faculty awareness of varied teaching strategies

  Evaluate the effectiveness of teaching strategies utilized by health-related faculty

- **Southern Arkansas University**

  Identify learning needs

  Identify high risk student

  Develop alternative teaching strategies

- **Texarkana Community College**

  Identify deficiencies of educational background or status of readiness for nursing program

  Identify whether race and entry skills are a variable in T.C.C. graduates, results of state board exams in our area (50-mile radius)

  Identify our culturally diverse student

  Develop routine or routes for remedial help prior to entry and after entry

- **Texas Christian University**

  Identify reasons for encouraging cultural diversity within the student body and faculty

  Identify professional values (Whom do we want as colleagues?)

  Explore socioeconomic and ethnic diversity in terms of professional values

  Identify characteristics of students

  Determine those student characteristics which hinder and those which enhance learning

  Determine faculty characteristics and teaching strategies which inhibit and which enhance learning

- **Tidewater Community College**

  Identify learning problems of each minority student enrolled in nursing

  Develop competency-based program

- **University of Alabama in Birmingham**

  Develop teaching strategies concomitant with student learning styles

- **University of Maryland at Baltimore**

  Identify teaching-learning barriers

  Create an environment whereby nurse faculty can become more aware of their values and attitudes toward culturally diverse students

  Make available a variety of approaches/strategies to assist faculty in adapting to cultural differences

- **University of St. Thomas**

  Increase faculty awareness of learning problems of students who are at high risk of not completing the program

  Increase communication skills of faculty in dealing with students in a counseling setting

  Assist teachers to develop self-paced learning activities with alternative strategies for meeting specific objectives.

  Increase faculty's ability to deal with conceptualizations on clinical practice

- **University of Tennessee at Nashville***

  Recognize student behaviors which indicate significant learning abilities and disabilities

  Explore specific ways the nursing faculty and students may use the Developmental Studies Program at UTN for:
  a) diagnostic and prognostic testing
  b) instructional styles used within the Developmental Studies Program

  Identify teaching-learning styles which appear to be most effective in nursing programs

  Develop a plan for faculty development based on the Project's findings

- **Valdosta State College**

  Explore alternate teaching strategies with the opportunity to:
  a) utilize a variety of teaching strategies
  b) evaluate self
  c) develop methods for peer evaluation
  d) develop effective student evaluation

  Identify cultural differences and learning patterns so that:
  a) cultural differences are respected
  b) communication is improved
  c) instruction has been adapted
  d) learning obstacles are reduced

- **Valencia Community College**

  Identify specific modalities to deal with culturally different students

  Implement modalities

  Evaluate usefulness of modalities

**Now Tennessee State University

Appendix C

Evaluation Questionnaires

EVALUATION OF THE FACULTY DEVELOPMENT IN NURSING
EDUCATION PROJECT (D10NU02029)
Southern Regional Education Board
130 Sixth Street, N.W.
Atlanta, Georgia 30313

The task force leader at each of the 20 project sites is invited to assist the project staff in evaluating the Faculty Development in Nursing Education Project. Personal identification is not required of any individual who completes this form.

The overall purpose of the three-year grant was to provide opportunities for faculty, particularly in nursing, to (a) identify learning problems, (b) study alternative learning strategies, (c) present instruction appropriate to the learning styles of students, and (d) recognize, respect, and adapt to cultural differences.

In addition to the assessment of the project indicated on the form provided faculty, we appreciate your reactions to the management of project activity during the three-year period.

Thank you for your support and cooperation.

	Yes	No
1. Were you given release time or reduced teaching responsibilities to conduct the project activities? If yes, please indicate the amount of time or teaching reduction granted. _____	[ ]	[ ]

_____

_____

2. Please describe how you organized the work of the committee. Discuss any problems and the measures used to eliminate them. _____

_____

(Add continuation pages if more space is needed.)

3. If you were to repeat this project (or could do it over) what changes would you make? Consider the following areas:

   3.1 Overall Project Goals:

_____

_____

3.2 Campus Objectives:

_____

_____

_____

3.3 Regional Activities, e.g., meetings, newsletters, campus visits:

_____

3.4 Campus activities, e.g., workshops, meetings:

_____

_____

3.5 Other (please specify):

_____

4. What did the project contribute to your faculty's and program's growth and development? _____

_____

_____

_____

_____

5. In what ways do you think participation in the project affected relationships with your students? _____

_____

	Yes	No
5.1 Has the retention of minority students increased during the three-year period?	[ ]	[ ]
6. Have plans been developed to continue faculty development activities upon termination of the grant in February 1980?	[ ]	[ ]

6.1 If yes, please describe _____

_____

7. Please check the appropriate box to indicate your:

7.1 Highest earned credential:

[ ] Baccalaureate (non-nursing)
[ ] Baccalaureate (nursing)
[ ] Master's (non-nursing)
[ ] Master's (nursing)
[ ] Doctorate (non-nursing)
[ ] Doctorate (nursing)

Faculty rank:

[ ] Instructor
[ ] Assistant Professor
[ ] Associate Professor
[ ] Professor
[ ] Other, please specify: _____

How long have you been employed at this institution? ___

COMPLETE AND RETURN TO:
Eula Aiken, Coordinator
Faculty Development in Nursing
Education Project
130 Sixth Street, N.W.
Atlanta, Georgia 30313
BY DECEMBER 31, 1979

FOR OFFICE USE ONLY
__Task Force Member
__Associate Degree
__Baccalaureate Degree
__Baccalaureate/Higher Degree

EVALUATION OF THE FACULTY DEVELOPMENT IN NURSING EDUCATION PROJECT (D10NU02029)
Southern Regional Education Board
130 Sixth Street, N.W.
Atlanta, Georgia 30313

Task force members at each of the 20 project sites are invited to assist the project staff in evaluating the Faculty Development in Nursing Education Project. Personal identification is not required of any individual who completes this form.

The overall purpose of the three-year grant was to provide opportunities for faculty, particularly in nursing, to (a) identify learning problems, (b) study alternative learning strategies, (c) present instruction appropriate to the learning styles of students, and (d) recognize, respect, and adapt to cultural differences.

Thank you for your support and cooperation.

Check one box for each item to indicate your opinions about project activities.

	Strongly Agree SA	Agree A	Disagree D	Strongly Disagree SD
1. The project objectives established at this campus were achieved.	[ ]	[ ]	[ ]	[ ]
Comments: _____				
2. The project activities, i.e., campus and regional, provided an opportunity for the nurse faculty to:				
2.1 identify learning problems.	[ ]	[ ]	[ ]	[ ]
2.2 study alternative learning strategies.	[ ]	[ ]	[ ]	[ ]
2.3 increase their knowledge of learning styles.	[ ]	[ ]	[ ]	[ ]
2.4 increase their awareness of cultural differences.	[ ]	[ ]	[ ]	[ ]
2.5 learn more about various instructional differences.	[ ]	[ ]	[ ]	[ ]

2.6 try different teaching methods.	[ ]	[ ]	[ ]	[ ]
2.7 become familiar with activities in other colleges to enhance teaching and learning.	[ ]	[ ]	[ ]	[ ]
2.8 increase their awareness of the resources available.	[ ]	[ ]	[ ]	[ ]
2.9 examine some of their values and beliefs about teaching and teachers, learning and learners.	[ ]	[ ]	[ ]	[ ]
2.10 assess the strengths and weaknesses of instructional strategies employed in their setting.	[ ]	[ ]	[ ]	[ ]
2.11 share ideas about effective teaching techniques with other nurse educators.	[ ]	[ ]	[ ]	[ ]
2.12 obtain assistance from consultants with expertise in specified areas related to teaching and learning.	[ ]	[ ]	[ ]	[ ]
2.13 improve their teaching skills.	[ ]	[ ]	[ ]	[ ]

Comments: _____

_____

_____

3. What were the significant accomplishments at your site as a result of participation in this three-year project? (Attach continuation pages if additional space is needed.) _____

_____

_____

_____

_____

4. What were significant problems encountered during this three-year project? _____

_____

_____

_____

_____

(Attach continuation pages if additional space is needed.)

4.1 What measures were instituted to overcome the problems? _____

_____

_____

_____

_____

5. Did the project generate any special interest groups or activities, e.g., development of proposals, establishment of committees, to continue faculty development activities? If yes, please describe: _____ Yes [ ] No [ ]

_____

_____

6. Please check the appropriate box to indicate your:

6.1 Sex:
- [ ] Male
- [ ] Female

6.2 Race:
- [ ] Asian
- [ ] Black
- [ ] Hispanic
- [ ] Native American
- [ ] White
- [ ] Other, please specify _____

6.3 Current Faculty Rank:
- [ ] Instructor
- [ ] Assistant Professor
- [ ] Associate Professor
- [ ] Professor
- [ ] Other, please specify _____

6.4 Highest Earned Credential:
- [ ] Baccalaureate
- [ ] Master's
- [ ] Doctorate
- [ ] Other, please specify _____

6.41 Please state the discipline: _____

7. How long have you been employed at this institution?

COMPLETE AND RETURN TO:
Eula Aiken, Coordinator
Faculty Development in Nursing
Education Project
130 Sixth Street, N.W.
Atlanta, Georgia 30313
BY DECEMBER 31, 1979

FOR OFFICE USE ONLY
__Nurse Faculty
__Associate Degree
__Baccalaureate Degree
__Baccalaureate/Higher
__ Degree

EVALUATION OF THE FACULTY DEVELOPMENT IN NURSING EDUCATION PROJECT (D10NU02029)
Southern Regional Education Board
130 Sixth Street, N.W.
Atlanta, Georgia 30313

You are invited to assist the project staff in evaluating the Faculty Development in Nursing Education Project. Personal identification is not required of any individual who completes this form.

The overall purpose of the three-year grant was to provide opportunities for faculty, particularly in nursing, to (a) identify learning problems, (b) study alternative learning strategies, (c) present instruction appropriate to the learning styles of students, and (d) recognize, respect, and adapt to cultural differences.

The task group at your campus identified specific objectives to be accomplished during the three-year project period; these were congruent with the over-all purpose of the project.

Check one box for each item to indicate your opinions.

	Strongly Agree SA	Agree A	Disagree D	Strongly Disagree SD
1. The project objectives established at this campus were achieved.	[ ]	[ ]	[ ]	[ ]
Comments: _____				
2. The project activities, i.e., campus and regional, provided an opportunity to:				
2.1 identify learning problems.	[ ]	[ ]	[ ]	[ ]
2.2 study alternative learning strategies.	[ ]	[ ]	[ ]	[ ]
2.3 increase knowledge of learning styles.	[ ]	[ ]	[ ]	[ ]
2.4 increase awareness of cultural differences.	[ ]	[ ]	[ ]	[ ]

2.5 learn more about various instructional differences.	[ ]	[ ]	[ ]	[ ]
2.6 try different teaching methods.	[ ]	[ ]	[ ]	[ ]
2.7 become familiar with activities in other colleges to enhance teaching and learning.	[ ]	[ ]	[ ]	[ ]
2.8 increase awareness of the resouces available to assist in teaching.	[ ]	[ ]	[ ]	[ ]
2.9 examine some values and beliefs about teaching and teachers, learning and learners.	[ ]	[ ]	[ ]	[ ]
2.10 assess the strengths and weaknesses of instructional strategies employed in your setting.	[ ]	[ ]	[ ]	[ ]
2.11 share ideas about effective teaching techniques with other nurse educators.	[ ]	[ ]	[ ]	[ ]
2.12 obtain assistance from consultants with expertise in specified areas related to teaching and learning.	[ ]	[ ]	[ ]	[ ]
2.13 improve teaching skills.	[ ]	[ ]	[ ]	[ ]

Comments: _____

_____

_____

3. Did the project generate any special groups or activities, e.g., development of proposals, establishment of committees, to continue faculty development activities? Yes [ ] No [ ]
If yes, please describe: _____

_____

_____

4. Have you initiated any changes in your teaching practices that might be related to ideas or activities generated by the project. If yes, please describe: Yes [ ] No [ ]

_____

_____

_____

Demographic Data

5. Please check the appropriate box to indicate your:

5.1 Sex:
- [ ] Male
- [ ] Female

5.2 Race:
- [ ] Asian
- [ ] Black
- [ ] Hispanic
- [ ] Native American
- [ ] White
- [ ] Other, please specify: _____

5.3 Current Faculty Rank:
- [ ] Instructor
- [ ] Assistant Professor
- [ ] Associate Professor
- [ ] Professor
- [ ] Other, please specify: _____

5.4 Highest Earned Credential:
- [ ] Diploma in nursing
- [ ] Associate Degree
- [ ] Baccalaureate (Nursing)
- [ ] Baccalaureate (Non-Nursing)
- [ ] Master's (Nursing)
- [ ] Master's (Non-Nursing)
- [ ] Doctorate (Nursing)
- [ ] Doctorate (Non-Nursing)

6. Please indicate:

6.1 Number years you have taught _____

6.2 Length of employment at current institution _____

6.3 Year of birth _____